



STATE OF IOWA

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DEPARTMENT OF HUMAN SERVICES
CHARLES M. PALMER, DIRECTOR

INFORMATIONAL LETTER NO. 998

DATE: May 13, 2011

TO: Iowa Medicaid Providers

FROM: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

RE: Hospice and Concurrent Services

EFFECTIVE: Upon Receipt

In supporting an Iowa Medicaid hospice member; a hospice program is able to provide a number of services that could include; but is not limited to:

- Skilled nursing
- Hospice aide
- Physician
- Ambulance
- Nursing facility services
- Pharmacy
- Medical equipment and supplies
- Inpatient
- Outpatient
- Respite
- Medical social services
- Physical, occupational, and speech therapies.

Dependent on medical necessity [441—IAC 78.36(1)a.(9)], any of the above-noted services could be provided concurrently to a hospice member to support or treat conditions that are not related to the terminal illness or related conditions. An attending physician may prescribe drugs to manage pain related to a terminal illness; while at the same time prescribe drugs unrelated to the terminal illness and the hospice benefit. Medicaid reimbursement to the pharmacy would be issued for two separate Medicaid programs.

In instances, such as this, when the same or similar hospice supports/services are provided concurrently with the same or similar non-hospice supports/services, the following points become imperative:

- Establish a clear communication process between the hospice and the concurrent service provider(s) that identifies all of the medically necessary services and supports, both related and unrelated to the terminal illness and related conditions, for each hospice member.
- Ensure all of the medically necessary services, both related and unrelated to the terminal diagnosis and related conditions, are documented in the hospice plan of care and the required documents for the concurrent service(s)

- Establish a process for both the hospice and the concurrent service provider(s) to insure its provider service(s) are documented and accurately submitted for hospice or non-hospice reimbursement.

Thank you for your attention to the coordination and policy development that will support comprehensive services for hospice members; and allow for accurate documentation and billing processes.

If you have any questions, please contact the IME Provider Services Unit at 1-800-338-7909 or locally (in Des Moines) at 256-4609 or by e-mail at imeproviderservices@dhs.state.ia.us.